

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 288 OF 1703
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Women Speak Out PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Najib Mahmud		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 05 / 2014	
Mailing Address 3432 Riverrock Ct		Amount 45.00	
City Baton Rouge	State LA	Zip Code 70820	Transaction ID : 3b3a43c7-43db-4276-a
Purpose of Expenditure Salary	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 07 / 05 / 2014	
Name of Federal Candidate Ms. Mary L Landrieu		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought 554635.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Najib Mahmud		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 05 / 2014	
Mailing Address 3432 Riverrock Ct		Amount 1.50	
City Baton Rouge	State LA	Zip Code 70820	Transaction ID : b0316002-c7e4-49e2-9
Purpose of Expenditure Mileage	Category/Type 002	Date of Disbursement or Obligation MM / DD / YYYY 07 / 05 / 2014	
Name of Federal Candidate Ms. Mary L Landrieu		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought 554635.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	46.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan

[Electronically Filed]

Date

 MM / DD / YYYY
05 / 14 / 2015

Signature